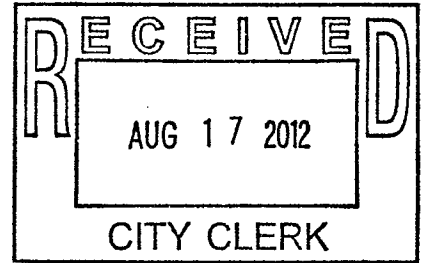


POLITICAL COMMITTEE
CITY/TOWN OF
CAMPAIGN FINANCE REPORT
2012 August/November Regular Election

FOR OFFICE USE ONLY



1. JOHN DILL'S EXPLORATORY COMMITTEE
 Full Name of Committee
FOR MAYOR
 Address _____
LAKE HADASUCITY AZ 86406
 City ZIP Code County Phone
 2. NONE
 Sponsoring Organization or Candidate and office
DR BILL ULLERY MAYOR
 Name of Candidate and Office Sought (if applicable)
bill@dh4homes.com
 E-Mail Address Fax #

3A. ID#

4. **REPORTING PERIOD** (Please check appropriate box)

DUE BETWEEN

- ☐ January 31 Report - For Period of _____ * thru December 31, 2011 January 1, 2012 and January 31, 2012
- ☐ June 30 Report - For Period of January 1, 2012 thru May 31, 2012 June 1, 2012 and June 30, 2012
- ☒ Pre-Primary Election Report - For Period of June 1, 2012 thru August 16, 2012 August 17, 2012 and August 24, 2012
- ☐ Post-Primary Election Report - For Period of August 17, 2012 thru September 17, 2012 September 18, 2012 thru September 27, 2012
- ☐ Pre-General Election Report - For Period of September 18, 2012 thru October 25, 2012 October 26, 2012 and November 2, 2012
- ☐ Post-General Election Report - For Period of October 26, 2012 thru November 26, 2012 November 27, 2012 and December 6, 2012
- ☐ **January 31, Report - For Period of November 27, 2012 thru December 31, 2013 January 1, 2014 and January 31, 2014

| 5. SUMMARY | Column A Total This Reporting Period | Column B Election Period Total To Date |
|---|--|--|
| 5a Surplus from Previous Campaign (or at time Statement of Organization was filed for the new committee) | | 0 |
| 5b Cash on Hand at the Beginning of this Reporting Period | 0 | |
| 5c Total Receipts (from corresponding columns on Detailed Summary Page, Line 8) | 0 | 0 |
| 5d Subtotal [add Lines b and c for Column A and add lines a and c for Column B] | 0 | 0 |
| 6a Total Debts and Obligations from Previous Campaign Committee at Beginning of this Election Period (or at time Statement of Organization was filed for the new committee) [Do not add or subtract this line from the other lines] | | 0 |
| 6b Total Disbursements (from corresponding columns on Detailed Summary Page, Line 18) | 1452.04 1552.04 | 1452.04 |
| 7. Cash on Hand at Close of Reporting Period [Subtract Line 6b from Line 5d] | 0 | 0 |

*Insert date which is 21 days after date of last election (A.R.S. §16-913).

**Other reports will be due before this reporting period if a special or recall election is held prior to the next general election.

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Page 2

1. Committee Name: JOHN BILLS EXPLORATORY COMMITTEE
FOR MAYOR

3. Report covering period from JUNE 1, 2012 thru AUG 16, 2012

2. ID#

RECEIPTS

4. Contributions other than loans and in-kind:

- (a) Individuals - more than \$25 (Total from Schedule A)
- (b) Individuals - aggregate \$25 or less (Total from Schedule A-1)
- (c) Political Committees (Total from Schedule B)
- (d) Subtotal Contributions [add 4(a), 4(b), and 4(c)]

- (e) Refund of contributions (Total from Schedule F-2)
- (f) Total Contributions Other than Loans and in-kind [subtract 4(e) from 4(d)]

- 5. (a) Loans made or guaranteed by candidate (Total from Schedule C)
- (b) All other loans (Total from Schedule C-1)

— (c) Total Loans [add 5(a) and 5(b)]

- 6. In-kind contributions (Total from Schedule E)
- 7. Dividends, interest, and other forms of receipts (Total from Schedule F-1)
- 8. Total Receipts [add 4(f), 5(c), 6, and 7]

QUALIFYING CONTRIBUTION RECEIPTS

Qualifying Contributions of \$5 from Individuals (Total from Schedule A2).

DISBURSEMENTS

- 9. Expenditures for operating expenses (Total from Schedule D)
- 10. Independent Expenditures (Total from Schedule D-1)
- 11. Value of In-kind expenditures (Total from Schedule E)
- 12. Loans made by reporting committee (Total from Schedule D-2)
- 13. (a) Repayment of loans made or guaranteed by candidate (Total from Schedule D-4)
- (b) Repayment of all other loans (Total from Schedule D-5)
- (c) Total Loan Repayments [add 13(a) and 13(b)]
- 14. Transfers to other political committees (Total from Schedule D-6)
- 15. Any other disbursement (Total from Schedule D-7)
- 16. Subtotal disbursements [add lines 9, 10, 11, 12, 13(c), 14, and 15]
- 17. Rebates, refunds and other offsets to operating expenses (Total from Schedule D-3)
- 18. Total disbursements [subtract line 17 from line 16]
- 19. Total Outstanding Debts owed by Reporting Candidate or Political Committee (Schedule F-3)

| COLUMN A THIS PERIOD | COLUMN B CAMPAIGN TO DATE |
|-------------------------|------------------------------|
|-------------------------|------------------------------|

0 0

0 0

0 0

0 0

0 0

0 0

0 0

\$ 452.04 \$ 452.04

0 0

\$ 452.04 \$ 452.04

\$ 1000 - 1000 -

0 0

\$ 1,452.04 1,452.04

0 0

0 0

\$ 452.04 \$ 452.04

0 0

\$ 1000 - 1000 -

0 0

0 0

0 0

0 0

0 0

0 0

1452.04 1452.04

0 0

1452.04 1452.04

0 0

20. I certify, under penalty of perjury, that I have examined the contents of this campaign finance report and to the best of my knowledge and belief it is true and complete.

Type or Print Name of Treasurer

Signature of Treasurer or Candidate or Designating Individual

Date

8-17-12

CONTRIBUTIONS more than \$25 - from INDIVIDUALS*

SCHEDULE A

2. ID #

1. Committee Name JOHN BILLY'S EXPLORATORY COMMITTEE3. Report covering period from JUNE 1 - 2012 FOR PLAYOR thru Aug 16, 2012

| 4 | CONTRIBUTIONS | DATE RECEIVED | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|-----|---|---------------|-----------------------------|--|
| | NAME, ADDRESS, OCCUPATION AND EMPLOYER OR CONTRIBUTOR | | | |
| 4a. | <div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div> | | | |
| b. | <div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div> | | | |
| c. | <div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div> | | | |
| d. | <div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div> | | | |
| e. | <div>LAST FIRST MI</div> <div>STREET ADDRESS</div> <div>CITY STATE ZIP</div> <div>OCCUPATION EMPLOYER</div> | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE A [If last page of Schedule A, transfer total to Detailed Summary Page Line 4(2), Column A] | | | |

*If contributions of \$25 or less are listed with contributor's name, address, occupation and employer on Schedule A, do not include them on Schedule A-1. List \$5 Clean Election qualifying contributions separately on Schedule A-2.

Page ___ of ___

CANDIDATE LOANS

SCHEDULE C

| | | |
|-----|--|-----------------|
| 1. | Committee Name <u>SON BILL'S EXPLORATORY COMMITTEE FOR U.S. HOUSE</u> | 2. ID # |
| 3. | Report covering period from <u>JUNE 1, 2012</u> thru <u>AUG 16, 2012</u> | |
| 4. | LOANS MADE OR GUARANTEED BY CANDIDATE | |
| | NAME AND ADDRESS FROM WHOM RECEIVED | |
| 4a. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | <u>DR BILL HULLERY</u> | <u>7-28-12</u> |
| | <u>735 LITTLE OR LAUREL</u> | <u>\$452.04</u> |
| | <u>86406</u> | <u>\$452.04</u> |
| | DESCRIPTION | |
| | <u>PRINTING ON VISA - J. HULLERY</u> | |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | | |
| | DESCRIPTION | |
| c. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | | |
| | DESCRIPTION | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | | |
| | DESCRIPTION | |
| e. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | | |
| | DESCRIPTION | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | |
| | | |
| | DESCRIPTION | |
| 5. | ENTER TOTAL OF LOANS MADE OR GUARANTEED BY CANDIDATE ONLY IF LAST PAGE OF SCHEDULE C [If last page of Schedule C, transfer total to Detailed Summary Page, Line 5(a), Column A] | <u>\$452.04</u> |

OTHER LOANS

SCHEDULE C1

1. Committee Name Jim Billie Exploration Committee

2. ID #

3. Report covering period from July 1, 2012 thru December 31, 2012

| 4 | ALL OTHER LOANS | DATE LOAN RECEIVED | AMOUNT OF LOAN | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|----|--|-----------------------|-------------------|---|
| 4a | NAME AND ADDRESS OF EACH INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) OR LOAN, AND ANY ENDORSER OR GUARANTOR OF LOAN. | | | |
| | NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | DESCRIPTION | | | |
| 4b | NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | DESCRIPTION | | | |
| 4c | NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | DESCRIPTION | | | |
| 4d | NAME OF PERSON OR COMMITTEE MAKING LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | NAME OF ENDORSER OR GUARANTOR OF LOAN, ADDRESS, CITY, STATE, ZIP, AND ID# | | | |
| | DESCRIPTION | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE C-1 (If last page of Schedule C-1, transfer total to Detailed Summary Page, Line 5(a), Column A) | | | |

CONTRIBUTIONS FROM POLITICAL COMMITTEES

SCHEDULE B

2. ID #

1. Committee Name JOHN B. LEE'S EXPLORATORY COMMITTEE FOR MAYOR

3. Report covering period from JAN 1, 2012 thru AUG 16, 2012

| 4 | CONTRIBUTIONS | | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|----|--|------------------------------------|-----------------------------|--|
| | IDENTITY OF CONTRIBUTOR AND DATE RECEIVED | | | |
| 4a | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| | <i>NOTE</i> | | | |
| b. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| c. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| d. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| e. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| f. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| g. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| h. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| i. | ID # | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DATE RECEIVED | | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE B [If last page of Schedule B, transfer total to Detailed Summary Page, Line 4(c), Column A] | | 0 | 0 |

CONTRIBUTIONS of \$25 or less - AGGREGATE TOTAL*

SCHEDULE A-1

1. Committee Name JOHN BILLY'S EXPLORATORY COMMITTEE
EDINBURGH

2. ID #

3. Report covering period from JUNE 1, 2012 thru AUG. 14, 2012

4. Aggregate Total of Contributions of \$25 or less

| DESCRIPTION | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TOTAL THIS CAMPAIGN TO DATE |
|---|-----------------------------|---|
| <u>None</u> | | |
| 5. TOTAL THIS PERIOD [Transfer total to Detailed Summary Page, Line 4(b), Column A] | <u>0</u> | 6. CUMULATIVE TOTAL THIS CAMPAIGN TO DATE [Transfer total to Detailed Summary Page, Line 4(b), Column B] <u>0</u> |

*If contributions of \$25 or less are listed with contributor's name and address on Schedule A, do not include them on this schedule.
List \$5 Clean Election qualifying contributions separately on Schedule A-2.

EXPENDITURES FOR OPERATING EXPENSES*

SCHEDULE D

| | | | |
|--|--|--------------------------|---------------------------|
| 1. Committee Name <u>JOHN BELL'S EXPLORATORY COMMITTEE</u> | | 2. ID # | |
| 3. Report covering period from <u>JUNE 1, 2012</u> | | thru <u>AUG 16, 2012</u> | |
| 4 | EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
| NAME AND ADDRESS TO WHOM EXPENDITURE (DISBURSEMENT) WAS MADE | | | |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP <u>JET PRINTING</u> <u>2237 ACORN</u> <u>LAKE AR 86403</u> | <u>8-24-12</u> | <u>\$452.04</u> |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED <u>PRINTING VIA VISA</u> | | |
| b. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| c. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| d. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| e. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| f. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | DESCRIPTION OF ITEMS OR SERVICES PURCHASED | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D (If last page of Schedule D, transfer total to Detail Summary Page Line 9, Column A) | | <u>\$452.04</u> |

*Expenditures, other than a contract, promise or agreement to make an expenditure resulting in credit

INDEPENDENT EXPENDITURES*

SCHEDULE D-1

1. Committee Name

2. ID #

3. Report covering period from

thru

| 4 | INDEPENDENT EXPENDITURES | DATE EXPENDITURE MADE | AMOUNT OF THE EXPENDITURE |
|-----|---|-----------------------|---------------------------|
| | IDENTIFY RECIPIENT OF EXPENDITURE AND CANDIDATE WHO IS BENEFITTED OR OPPOSED | | |
| 4a. | NAME, ADDRESS, CITY, STATE AND ZIP <i>NO</i> | | |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • | | |
| | CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| 4b. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • | | |
| | CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| 4c. | NAME, ADDRESS, CITY, STATE AND ZIP | | |
| | PURPOSE AND DESCRIPTION OF PURCHASE Benefitted • • Opposed • • | | |
| | CANDIDATE OFFICE SOUGHT YEAR OF ELECTION | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-1 [If last page of Schedule D-1, transfer total to Detailed Summary Page Line 10, Column A] | | |

*SEE A.R.S. § 16-901(14).

I certify, under penalty of perjury, that the above stated independent expenditure(s) was not made in cooperation, consultation or concert with or at the request or suggestion of any candidate or any campaign committee or agent of that candidate.

Signature of Treasurer

NAMES, OCCUPATIONS AND EMPLOYERS AND AMOUNT CONTRIBUTED BY EACH OF THE THREE TOP CONTRIBUTORS WITHIN THE LAST SIX MONTHS

AMOUNT

LOANS MADE BY REPORTING COMMITTEE

SCHEDULE D-2

1. Committee Name

Win Bell, Georgetown Council
2012

2. ID #

3. Report covering period from

Jan 1 2012 thru *Aug 1 2012*

| 4 | LOANS MADE BY THE REPORTING COMMITTEE | DATE LOAN MADE | AMOUNT OF THE LOAN |
|-----|---|-------------------|-----------------------|
| | NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM LOAN (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# <i>NOPE</i> | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| g. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| h. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| i. | NAME, ADDRESS, CITY, STATE, ZIP, AND ID# | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-2 (Transfer total to Detail Summary Page Line 12, Column A) | | <i>0</i> |

OFFSETS TO OPERATING EXPENSES *

SCHEDULE D-3

1. Committee Name

Jim White - Maryland Council on the Arts

2. ID #

3. Report covering period from

1/1/12

thru

12/31/12

| REBATES, REFUNDS AND OTHER OFFSETS TO OPERATING EXPENSES | | DATE REFUND RECEIVED | AMOUNT OF THE REFUND |
|--|-------------------------------------|----------------------------|----------------------------|
| NAME AND ADDRESS FROM WHOM REFUND OR REBATE WAS RECEIVED | | | |
| 4a. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| c. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| e. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| | DESCRIPTION OF REFUND | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-3 (If last page of Schedule D-3, transfer total to Detailed Summary Page Line 17 Column A)

* Includes return of contributions made by reporting committee

0

REPAYMENT OF CANDIDATE LOANS

SCHEDULE D-4

1. Committee Name

John F. Kelly Jr. for Mayor

2. ID #

3. Report covering period from

Jan 1, 2011

thru

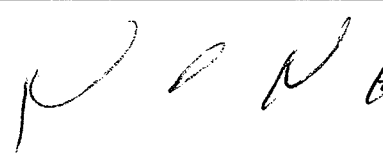

May 1, 2012

| REPAYMENT OF LOANS MADE OR GUARANTEED BY CANDIDATE | | DATE REPAYMENT MADE | AMOUNT OF THE REPAYMENT |
|--|-------------------------------------|---------------------------|-------------------------------|
| NAME AND ADDRESS TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | | |
| 4a. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| b. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| c. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| d. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| e. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| f. | NAME, ADDRESS, CITY, STATE, AND ZIP | | |
| 5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-4 [Transfer total to Detail Summary Page, Line 13(a), Column A] | | | 0 |

SCHEDULE D-5

3. Report covering period from

2. ID #

| 4 | REPAYMENT OF ALL OTHER LOANS | DATE REPAYMENT MADE | AMOUNT OF THE REPAYMENT |
|-----|---|---------------------------|---|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID#  | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| 5. | ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-5 (Transfer total to Detailed Summary Page, Line 13(b), Column A) | |  |

ANY OTHER DISBURSEMENT

SCHEDULE D-7

1. Committee Name

San Francisco County Central
for 2017

2. ID #

3. Report covering period from

Jan 1, 2017

thru

May 16, 2017

| ANY OTHER DISBURSEMENTS | | DATE DISBURSEMENT MADE | AMOUNT OF THE DISBURSEMENT |
|--|---|------------------------------|----------------------------------|
| NAME, ADDRESS AND ID# OF COMMITTEE TO WHOM DISBURSEMENT WAS MADE; DESCRIPTION | | | |
| a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-7 (Transfer total to Detailed Summary Page Line 15 Column A)

TRANSFERS TO OTHER POLITICAL COMMITTEES

SCHEDULE D-6

1. Committee Name

Democratic Party of the District of Columbia

2. ID #

3. Report covering period from

January 1, 2017

thru

December 31, 2017

| 4 | TRANSFERS MADE BY THE REPORTING COMMITTEE | DATE TRANSFER MADE | AMOUNT OF THE TRANSFER |
|-----|---|--------------------|------------------------|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ID# AND ADDRESS OF THE POLITICAL COMMITTEE) TO WHOM REPAYMENT (DISBURSEMENT) WAS MADE | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE D-6 [Transfer total to Detailed Summary Page, Line 14, Column A]

0

DIVIDENDS, INTEREST, AND OTHER RECEIPTS

SCHEDULE F-1

1. Committee Name

San Francisco Bay Area Republican Council

2. ID #

3. Report covering period from

June 1, 2012

thru

Aug 16, 2012

| 4 | DIVIDENDS, INTEREST AND OTHER FORMS OF RECEIPTS | DATE AMOUNT RECEIVED | AMOUNT OF THE RECEIPT |
|-----|---|----------------------------|-----------------------------|
| | NAME AND ADDRESS FROM INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIPT WAS RECEIVED | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | |
| | DESCRIPTION OF RECEIPT | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-1 (If last page of Schedule F-1, transfer total to Detailed Summary Page Line 7 Column A)

0

IN-KIND CONTRIBUTIONS and EXPENDITURES

SCHEDULE E

1. Committee Name JOHN BILLY'S EXPLORATORY COMMITTEE
2012 MAYOR

2. ID #

3. Report covering period from JUNE 1, 2012 thru AUG 16, 2012

| 4 | IN-KIND CONTRIBUTIONS and EXPENDITURES | | DATE | FAIR MARKET VALUE |
|--|---|---|----------------|-------------------|
| NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) FROM WHOM RECEIVED OR TO WHOM GIVEN | | | | |
| 4a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>DR BILL MCCOY</u> <u>L</u> <u>640 AZ 86406</u> | CONTRIBUTION ** <u>IN KIND</u> EXPENDITURE ** <u>0</u> | <u>7-28-12</u> | <u>\$ 800</u> |
| DESCRIPTION <u>WEBSITE 242 BLOCK DEVELOPMENT</u> | | | | |
| OCCUPATION <u>RETIRED AND</u> <u>OWNER</u> | | EMPLOYER <u>DBH HOMES</u> | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# <u>ALENA HOLLEBAIN</u> <u>640 AZ 86406</u> | CONTRIBUTION ** <u>IN KIND</u> EXPENDITURE ** <u>0</u> | <u>7-28-12</u> | <u>\$ 200</u> |
| DESCRIPTION <u>WEBSITE 242 BLOCK DEVELOPMENT</u> | | | | |
| OCCUPATION <u>CONSULTANT</u> | | EMPLOYER <u>SELF</u> | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | CONTRIBUTION ** EXPENDITURE ** | | |
| DESCRIPTION | | | | |
| OCCUPATION | | EMPLOYER | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | CONTRIBUTION ** EXPENDITURE ** | | |
| DESCRIPTION | | | | |
| OCCUPATION | | EMPLOYER | | |
| 5. | ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 6, Column A) | | | <u>\$1,000</u> |
| 6. | ENTER TOTAL IN-KIND CONTRIBUTIONS ONLY IF LAST PAGE OF SCHEDULE E (If last page of Schedule E, transfer total to Detailed Summary Page Line 11, Column A) | | | <u>\$1,000</u> |

OFFSETS TO CONTRIBUTIONS RECEIVED *

SCHEDULE F-2

1. Committee Name

John P. Kelly for Congress

2. ID #

3. Report covering period from

Jan 1, 2012 to Dec 31, 2012

| 4 | REFUNDS AND OTHER OFFSETS TO CONTRIBUTIONS RECEIVED | | DATE REFUND MADE | AMOUNT OF THE REFUND |
|----|---|--|------------------------|----------------------------|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM REFUND WAS MADE | | | |
| a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |
| f. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | |
| | DESCRIPTION OF REFUND | | | |

5. ENTER TOTAL ONLY IF LAST PAGE OF SCHEDULE F-2 (If last page of Schedule F-2, transfer total to Detailed Summary Page, Line 4(E), Column A)

0

* Includes return of contributions received by reporting committee

DEBTS AND OBLIGATIONS (Excluding Loans)

SCHEDULE F-3

1. Committee Name JOHN BILL'S EXPLORATORY COMMITTEE FOR MAYOR

2. ID #

3. Report covering period from JULY 1, 2012 thru AUG 16, 2012

| 4 | DEBTS AND OBLIGATIONS | OUTSTANDING BALANCE BEGINNING THIS PERIOD | AMOUNT INCURRED THIS PERIOD | PAYMENT THIS PERIOD | OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|----|--|--|--------------------------------|------------------------|---|
| | NAME AND ADDRESS OF INDIVIDUAL (OR NAME, ADDRESS AND ID# OF THE POLITICAL COMMITTEE) TO WHOM DEBT IS OWED | | | | |
| a. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| b. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| c. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| d. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| e. | NAME, ADDRESS, CITY, STATE, ZIP AND ID# | | | | |
| | DESCRIPTION OF DEBT | | | | |
| 5. | ENTER TOTAL OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD ONLY IF LAST PAGE OF SCHEDULE F-3 [Transfer total to Detail Summary Page Line 19, Column A] | | | | 0 |